

# TENNIS BALL CRICKET FEDERATION OF INDIA

Recog. By: Ministry of Youth Affairs & Sports, Govt. of India

Affiliated to: Asian Tennis Ball Cricket Federation

Regd. office: Sports Point, Near Head Post office, Main Bazar, Gorakhpur, U.P., India

Ph. No. +91-551-2205451, 6823311 Fax No. +91-551-2349223, 2349378

Website- [www.tbcfi.com](http://www.tbcfi.com) – E-mail: [tbcfi@rediffmail.com](mailto:tbcfi@rediffmail.com), [anisalari@rediffmail.com](mailto:anisalari@rediffmail.com)

Mobile No. +91-9415278173, 9839661773, 9839654645,

## PROFORMA TBCFI

NAME OF THE STATE/UNIT:.....

NAME OF CHAMPIONSHIP:.....

HELD AT:.....FROM.....

1- NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
2-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
3-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
4-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
5-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
6-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
7-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	

Cont...2

8-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
9-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
10-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
11-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
12-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
13-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	
14-NAME: _____ S/O: _____ ADDRESS: _____ D.O.B.: _____ Player Signature: _____	

Coach Name: \_\_\_\_\_ Manager Name: \_\_\_\_\_

**Note:** Certified that All the Player and official belong of our state

President/Secretary are requested please attest all the photograph with seal

Signature Seal  
Secretary/President

Name of State Secretary/President: .....

Address: .....

Phone: .....

Place: ..... Date: .....



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Mobile No. +91-94152178173, 9839661773,

Attested State Sec.

### **Player Registration Application form (Individual)**

State/Unit

Registration No. \_\_\_\_\_

Federation

Registration No. \_\_\_\_\_

Name of State	
Name of player in Block Capital Letters (Boys/Girls)	
Father Name	
Residence Address	
Phone /Mobile No. & E- mail	
Date of Birth (with proof)	
Age	
Body Mark Any one	
School/University Name with Place	
I-Card No.	
Date & Signature (Player)	

I Certify that Player of our Association/Unit and that the particulars mentioned above are correct to the best of our knowledge & belief.

Register officer (Sig)  
T.B.C.F.I.

Signature & Seal  
Secretary/President  
State/Unit

**Note:** Proof of Date of Birth (Sub-Junior/Junior) High School/10<sup>th</sup> Class Board Certificate is a must. Photocopy should be duly attested by school principal. Without submitted the form not issue the certificate.